IDAHO STATE BOARD OF COSMETOLOGY

APPLICATION FOR INSTRUCTOR LICENSURE

NOTICE

As noted in § 54-816, Idaho Code, the board may either refuse to issue or renew, or may suspend or revoke, a permit or license for any of the following causes: The conviction of a felony; Malpractice or in-competency; Continued practice by a person knowingly having an infectious or contagious disease; False or deceptive statements in advertising; Habitual use of habit-forming drugs; Immoral or unprofessional conduct; Submitting a fraudulent application or obtaining a license or permit through fraud; The violation of any other provision of the cosmetology laws or rules.

INSTRUCTIONS

All requested information must be provided and all questions must be answered. Failure to complete the application will result in its return to you.

Method #1 - If you are applying for an instructor license based on experience and training, you must pass the instructor examination and document the number of years you have practiced under licensure and any training received as a student instructor. Experience documentation must include the name and address of all businesses in which you obtained the experience; and the beginning and ending dates of experience for each business listed. All training received as a student instructor must be documented by an original student record of instruction, noting the name and address of the school and signed by an instructor or owner of the school. If you have more than 1 year, but less than 2 years of experience, you must document 6 months of student instructor training. If you have more than 2 years, but less than 5 years of experience, you must document 3 months of student instructor training. If you have 5 or more years of experience, student instructor training is not required. Your application must include the examination fee and the original license fee.

Method #2 - If you are applying for an instructor license based on college credits, you must submit a certified transcript of no less than twelve (12) semester credits or the equivalent as outlined in Rule 600. If the credits are approved, the full examination will not be required. The Board has ruled that **all applicants must pass the Idaho Jurisprudence examination covering both laws & rules**, prior to licensure as noted under Rule 450. Your application must include the instructor examination fee and the original license fee.

Endorsement - If you are applying for instructor licensure by endorsement or examination based on a license from another state, etc., your application must include the original license fee, acceptable proof of birth, and the endorsement fee (if applicable). The Bureau of Occupational Licenses must receive certification of your licensure as an instructor directly from the licensing agency that issued your license, before your application will be processed. Certification of your licensure must include an itemized record of instruction that shows the total hours of instruction, and the services completed during training. You are responsible for requesting certification from the agency that issued your license. Applicants from AK, CO, CN, D.C., FL, GA, IL, MD, MA, MI, NY, NC, OH, OK, OR, TX, UT, VT, VA, WA, Puerto Rico, and other territories and countries must also submit proof of a minimum 10th grade education or it's equivalent. To qualify for instructor endorsement, you must hold a current instructor license issued by the licensing authority of another state, country, etc., and:

1. You must document twelve (12) semester college credit hours obtained from the Education Department, Speech Communications Department &/or the Psychology/Sociology Department and other credit at the discretion of the Board..

OR

2. You must document satisfactory completion of teaching seminars in cosmetology or electrology/esthetics, which must be approved by the board. Fourteen (14) clock hours in an approved seminar is equivalent to one (1) semester college credit hour.

3. You must verify satisfactory teaching experience as a qualified instructor in another state. Said experience shall be no less than three (3) years of the previous five (5) years immediately prior to application.

The State of Idaho Cosmetology Laws and Rules may be downloaded at: www.ibol.idaho.gov/cos.htm

ENDORSEMENT FEE

\$100.00

ORIGINAL INSTRUCTOR LICENSE \$ 30.00 (\$5.00 if you hold a current Idaho RC, EST, EE, or NT license) FEES ARE NONREFUNDABLE

A.D.A. NOTICE

If you have a disability as defined under the Americans with Disabilities Act, and you require special accommodation, please attach a written request for special accommodation that identifies the specific services that are being requested to meet your special needs. A request for special accommodation must be accompanied by current medical documentation identifying your disability and supporting the need for the accommodations being requested.

Questions regarding this application or the requirements for licensure may be addressed to:

BUREAU OF OCCUPATIONAL LICENSES 1109 Main St., Suite 220, Boise, Idaho 83702

e-mail - cos@ibol.idaho.gov

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IDAHO STATE BOARD OF COSMETOLOGY

Bureau of Occupational Licenses 1109 Main Street, Suite 220 Boise, Idaho 83702-5642

APPLICATION FOR INSTRUCTOR LICENSURE

I hereby submit my qualifications and make application for a license to practice as an instructor of:

Complete this form by providing the requested information (please print & note the attached instructions). Your signature must be notarized and the appropriate fees must be attached. Submit the completed form to the address noted above.

[]Nail Technology []Cosmetology []Esthetics []Electrology in the State of Idaho under the provisions of Title 54, Chapter 8, Idaho Code as amended. 1. Full Name (Mr., Mrs., or Ms.) _____ 2. Address of Record (The above address is public record) Street State City Zip 3. Mailing address (The above address is not public record) Street City State Zip Place of Birth Date of Birth ____ (All Endorsement applicants must attach proof of age. A copy of your birth certificate, passport, or military ID, is acceptable.) 5. Social Security No. - - Home phone number () E-mail 6. Are you currently licensed in Idaho to practice cosmetology wholly or in part? [] Yes [] No (If Yes, attach a copy of your license and continue below.) If No, complete the attached addendum and continue below.) 7. Do you have practical experience under licensure? []Yes []No (If yes, please attach a detailed statement of your experience, noting the names and addresses of the businesses in which you gained your experience and the dates of experience for each business listed.) 8. Have you completed 12 semester college credits or the approved equivalent (see Rule 600)? [] Yes [] No (If Yes, attach college transcripts or verification of completion of 168 clock hours of teaching seminars.) 9. Are you currently licensed to practice as an instructor in any other state? [] Yes [] No (If Yes, certification of licensure must be received directly from the licensing authority before your application will be processed.) 10. Have you ever been convicted of any State or Federal felony? [] Yes [] No (If Yes, a detailed statement, including a summary of the charges, the final order, any probation or parole documentation, and any other relevant information must be attached.) **AFFIDAVIT** I hereby certify that I am the person named above and that I have no infectious or contagious disease which may pose a threat to the general public and that I am of good moral character and temperate habits. I further certify that I have successfully completed the required training program and have been duly graduated. I further certify that I have reviewed the Idaho Laws and Rules governing the practice of Cosmetology and that I will comply with those laws and rules should I be granted licensure. I swear or affirm that the information provided on and attached to this application is true and accurate to the best of my knowledge and belief. I hereby authorize and direct any person, agency, firm, or other entity to release to the Bureau of Occupational Licenses or it's identified agent any and all information, communications recommendations, reports, records, statements, or disclosures, whether public, privileged or confidential, that may relate to my professional qualifications or credentials or that may have bearing on my eligibility for licensure. Signature of applicant State of ______, County of ______, ss.
Subscribed and sworn before me this _____ day of ______, 20 _____. (seal) Notary Public official signature my commission expires

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ADDENDUM

A. CHARACTER REFERENCES: Please pr	ovide the names and addresses of three character references below.
B. WORK EXPERIENCE: List your work expractice.	perience including employers names, addresses, phone numbers and dates of
NAME OF SHOP	EMPLOYERS NAME
ADDRESS of SHOP	PHONE NO
DATES of PRACTICE	то
NAME OF SHOP	EMPLOYERS NAME
ADDRESS of SHOP	PHONE NO.
DATES of PRACTICE	то
NAME OF SHOP	EMPLOYERS NAME
ADDRESS of SHOP	PHONE NO.
DATES of PRACTICE	TO
If more space is needed, attach a separate shee	et of paper
	<u></u>
C. PHOTOGRAPH: Attach an original pass	port photograph of yourself below.
	HEIGHT
	WEIGHT
ATTACH PHOTOGRAPI	HERE EYE COLOR
	HAIR COLOR
	OTHER DISTINGUISHING FEATURES

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